DECLARATION (37 CFR §1.63) FOR UTILITY OR DESIGN PATENT APPLICATION USING AN APPLICATION DATA SHEET (37 C.F.R. § 1.76)

Attorney Docket Number		INN-122		
First Named Inventor		Francois Romagne		
COMPLE		TE IF KNOWN		
Application Number	10,	/539,828		
Filing Date	Ju	ne 20, 2005		
Group Art Unit				
Examiner Name				

This	declaration	is	directed	to	an	application	entitled:	Pharmaceutical	Compositions	Having	an	Effect	on	the
Prol	iferation o	f N	K Cells	an	d a	Method Us	sing the	Same						

As the below named inventor(s), I/we declare that:

This declaration is directed to:

The attached applica	ation or 10/539,828			
Application No.	10/539,828	, filed on	June 20, 2005	
as amende	ed on		(if applicable);	

I/we believe that I/we am/are the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought;

I/ we have reviewed and understand the contents of the above-identified application, including the claims, as amended by any amendment specifically referred to above;

I/we acknowledge the duty to disclose to the United States Patent and Trademark Office all information known to me/us to be material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT International filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under Title 35, United States Code §119 and/or §365 of any foreign application(s) for patent or inventor's certificate listed below and have also identified any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed:

Application Serial No.	Country	Filing Date	Priority	Claimed
			Yes 🗌	No 🗌
			Yes 🗌	No 🗌

All statements made herein of my/own knowledge are true, all statements made herein on information and belief are believed to be true, and further that these statements were made with the knowledge that willful false statements and the like are punishable by fine or imprisonment, or both, under 18 U.S.C. § 1001, and may jeopardize the validity of the application or any patent issuing thereon.

Full Name(s) of Inventors

Inventor One: François Romagne	Citizen of: FR		
Signature:			
Inventor Two: Andre Pascale	Citizen of: FR		
Signature:			
Inventor Three:	Citizen of:		
Signature:			
Additional inventors are being named on the	additional forms attached hereto.		

PTO/SB/81 (09-03)
Approved for use through 11/30/2005. OMB 0651-0035
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
o a collection of information unless it displays a valid OMB control.

Under the Paperwork Reduction Act of 1995, no persons are require

POWER OF ATTORNEY and **CORRESPONDENCE ADDRESS INDICATION FORM**

	rmation unless it displays a valid OMB control number.
Application Number	10/539,828
Filing Date	June 20, 2005
First Named Inventor	Francois Romagne
Title	Pharmaceutical Compositions
Art Unit	
Examiner Name	
Attorney Docket Number	INN-122

I hereby app	oint:					٦			
✓ Practif	tioners associated w	vith the Customer Number:		23557					
OR									
Practi	tioner(s) named belo	ow:							
		Name			Registration Nu	mber			
			ļ		•				
									
	torney(s) or agent(s Office connected the) to prosecute the application	identified above,	and to trans	act all business in	the United States Patent and			
Trademark C	onice connected the	erewiter.							
Please recog	gnize or change the	correspondence address for	the above-identif	ied applicatio	on to:				
The	e address associate	ed with the above-mentioned (Customer Numbe	ır:					
OR									
L Th	e address associate	ed with Customer Number:							
The address associated with customer number.									
OR									
	Firm or Individual Name								
Addre									
Addre	:88			I Obete I		7:			
City				State		Zip			
Coun	try			<u>,</u>					
Telep	hone			Fax					
I am the:									
✓ Ap	plicant/Inventor.								
	•	h	D 2 74						
		the entire interest. See 37 CF FR 3.73(b) is enclosed. (Forn							
	itomorit arradi di di		· · · · · · · · · · · · · · · · · · ·						
		SIGNATURE o	f Applicant or A	ssignee of R	Record				
Name	Francois Romagne	_							
Signature									
Date									
		s or assignees of record of the er	ntire interest or their	representative	e(s) are required. Sub	mit multiple			
forms if more than one signature is required, see below*.									
▼ *Tota	l of _2	forms are submitted.	★Total of 2 forms are submitted.						

This collection of information is required by 37 CFR 1.31 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Approved for use through 11/30/2005. OMB 0651-0035

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

the a collection of information upless it displays a write ONES. Under the Paperwork Reduction Act of 1995, no persons are require

POWER OF ATTORNEY and **CORRESPONDENCE ADDRESS** INDICATION FORM

	mation unless it displays a valid OMB control number.
Application Number	10/539,828
Filing Date	June 20, 2005
First Named Inventor	Francois Romagne
Title	Pharmaceutical Compositions .
Art Unit	
Examiner Name	
Attorney Docket Number	INN-122

I hereby appoint:		
Practitioners associated with the Customer Number:	23557	
OR		
Practitioner(s) named below:		
Name	The state of the s	Registration Number
as my/our attorney(s) or agent(s) to prosecute the application Trademark Office connected therewith.	identified above, and to transact	all business in the United States Patent and
Please recognize or change the correspondence address for	the above-identified application to	o:
The address associated with the above-mentioned	Customer Number:	
OR		
The address associated with Customer Number:		
OR		
Firm or		
Individual Name Address		
Address		
City	State	Zip
Country	,	
Telephone	Fax	
lam the:		
✓ Applicant/Inventor.		
Assignee of record of the entire interest. See 37 CF		
Statement under 37 CFR 3.73(b) is enclosed. (Form	1 PTO/SB/96)	77C 2.794 2817 YOUR
SIGNATURE o	f Applicant or Assignee of Reco	ord
Name Pascale Andre / / /		MEDINATE CONTROL OF CO
Signature 1		
Date 07/01/05	7	Telephone
NOTE: Signatures of all the inventors or assignees of record of the er forms if more than one signature is required, see below*.	ntire interest or their representative(s) a	are required. Submit multiple
*Total of 2 forms are submitted.		

This collection of information is required by 37 CFR 1.31 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.